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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 922-4001

From: Account Name : MURPHY FINANCIAL SERVICES, INC.
Account Number : I20000000090
Phone : (321) 733-1040
Fax Number : (321) 733-7014

FILED
00 JUN 13 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

~~JKL & ASSOCIATES, INC.~~
JKL Financial Services, Inc.

Certificate of Status	1
Certified Copy	0
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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 13, 2000

MURPHY FINANCIAL SERVICES

SUBJECT: JKL & ASSOCIATES, INC.
REF: W00000014963

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

THE CONFLICT IS JKL ASSOCIATES, INC DOC #P97000030367.

If you have any further questions concerning your document, please call (850) 487-6931.

Becky McKnight
Document Specialist

FAX And. #: H00000031499
Letter Number: 300A00033723

Division of Corporations - P.O. BOX 6327 Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION
OF
JKL FINANCIAL SERVICES, INC.**

The undersigned subscriber to these Articles of Incorporation, being a natural person competent to contract, hereby forms a corporation under the laws of the State of FLORIDA.

ARTICLE I

NAME

The name of this corporation is JKL FINANCIAL SERVICES, INC.

ARTICLE II

NATURE OF PROFESSIONAL BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of FLORIDA, or any other state, country, territory or nation.

ARTICLE III

CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any one time is 10,000 shares of common stock, having a par value of \$1.00 per share.

ARTICLE IV

ADDRESS

The street address of the initial registered office of the corporation shall be: 200 S. Harbor City Blvd. Fifth Floor, Melbourne, FL 32901 and the name of the initial Registered Agent for the corporation at that address is: Leslie R. Murphy.

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TALLAHASSEE, FLORIDA

ARTICLE V
SPECIAL PROVISIONS

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations thereunder. Such actions as may be necessary shall be deemed to have been taken by the appropriate officers to accomplish this compliance.

ARTICLE VI
TERMS OF EXISTENCE

This corporation shall exist perpetually.

ARTICLE VII
LIMITATION OF LIABILITY

Each director, stockholder and officer, in consideration for her services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by her in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against her by reason of her being or having been a director, stockholder or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

ARTICLE VIII
SELF DEALING

No contract or other transaction between the corporation and other corporations, in the absence of fraud, shall be affected or invalidated by the fact that any one or more of the directors of the corporation is or are interested in a contract or transaction, or are directors or officers of any corporation, and any director or directors, individually or jointly, may be a party to, or may be interested in such contract, act or transaction, or in any way connected with such person or persons firm or corporation, and each and every person who may become a director of the corporation is hereby relieved from any liability that might otherwise exist from this contracting with the corporation for the benefit of herself or any firm, association or corporation in which she may be in any way interested. Any director of the corporation may vote upon any transaction with the corporation without regard to the fact that she is also a director of such subsidiary or corporation. This corporation shall have a minimum of one director. The initial Board of Directors shall consist of:

Leslie R. Murphy

ARTICLE IX
INCORPORATOR

The name and address of the incorporator is:

*Leslie R. Murphy
200 S. Harbor City Blvd, Fifth Floor
Melbourne, FL 32901*

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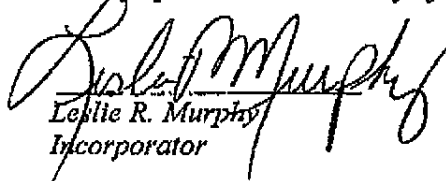
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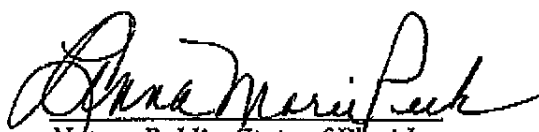
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STATE OF FLORIDA
COUNTY OF BREVARD

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County aforesaid, personally appeared Leslie R. Murphy to me known and who executed the foregoing Articles of Incorporation, and she acknowledged before me that she subscribed to these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal, in the State and County aforesaid this 9th day of June 2000.


Leslie R. Murphy
Incorporator


Notary Public, State of Florida
My Commission Expires:



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P. 07

DESIGNATION OF AND ACCEPTANCE BY REGISTERED AGENT

The following is submitted in compliance with the laws of the State of FLORIDA.

JKL FINANCIAL SERVICES, INC., a corporation organizing under the laws of the State of Florida, with its principal office located at:

***200 S. Harbor City Blvd, Fifth Floor
Melbourne, FL 32901***

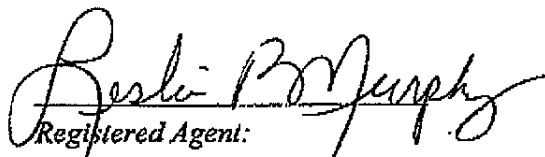
has named:

***Leslie R. Murphy
200 S. Harbor City Blvd, Fifth Floor
Melbourne, FL 32901***

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ACCEPTANCE

I agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above designated address) in some conspicuous place in the office as required by law.


Registered Agent:

BEFORE ME, the undersigned authority, this day appeared Leslie R. Murphy, at 200 S. Harbor City Blvd, Fifth Floor, Melbourne, FL, County of Brevard, State of Florida, who is personally known to me or who showed _____ as identification and who did/did not take an oath and who, after being duly sworn, deposes and says that the facts and matters contained above are true and correct, and that she has executed the same for the purposes expressed herein.

WITNESS my hand and official seal this 9th day of June 2000.


Notary Public, State of Florida

My Commission Expires:



Anna Marie Peek
Commission # GC 894764
Expires Jan. 23, 2004
Bonded Thru
Atlantic Bonding Co., Inc.

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TALLAHASSEE, FLORIDA